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PRE-APPEAL BRIEF REQUEST FOR REVIEW		Docket Number (Optional) 112740-372													
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ Signature _____ Typed or printed name _____		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 5px;">Application Number 10/019,329</td> <td colspan="2" style="padding: 5px;">Filed May 9, 2002</td> </tr> <tr> <td colspan="4" style="padding: 5px;">First Named Inventor Volker Deichmann</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Art Unit 2682</td> <td colspan="2" style="padding: 5px;">Examiner Tuan A. Tran</td> </tr> </table>		Application Number 10/019,329		Filed May 9, 2002		First Named Inventor Volker Deichmann				Art Unit 2682		Examiner Tuan A. Tran	
Application Number 10/019,329		Filed May 9, 2002													
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Art Unit 2682		Examiner Tuan A. Tran													
<p>Applicant requests review of the final rejection in the above-identified application. No amendments are being filed with this request.</p> <p>This request is being filed with a notice of appeal.</p> <p>The review is requested for the reason(s) stated on the attached sheet(s). Note: No more than five (5) pages may be provided.</p> <div style="margin-top: 20px;"> <p>I am the</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98) <input checked="" type="checkbox"/> attorney or agent of record. 48,196 Registration number _____ <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____ </div> <div style="width: 45%; text-align: center;">  _____ Signature Peter Zura _____ Typed or printed name 312-807-4208 _____ Telephone number April 20, 2006 _____ Date </div> </div> </div> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".</p>															
<input type="checkbox"/> *Total of _____ forms are submitted.															

This collection of information is required by 35 U.S.C. 132. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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